Fill in this information to identify your case:						
Debtor 1	Jamal Uddin Pati	llo				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT O	PF MICHIGAN			
Case number	16-52620-MAR					
(if known)	TO SECRET MIAIX			_	k if this is ar	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		.,	
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)		•
١.	1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,146.11
	1c. Copy line 63, Total of all property on Schedule A/B	\$	24,146.11
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	26,864.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	7,890.42
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	27,385.96
	Your total liabilities	\$	62,140.38
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,205.95
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,460.66
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal,	family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,890.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,890.42
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	7,890.42

Fill in this infor	mation to identify your cas	e and this filing:			
Debtor 1	Jamal Uddin Patillo				
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Br	ankruptcy Court for the: EA	STERN DISTRICT OF	MICHICAN		
Officed States Ba	ankiupicy Count for the.	STERN DISTRICT OF	WICHIOAN		
Case number	16-52620-MAR				☐ Check if this is an
					amended filing
Official Fo	rm 106A/B				
_	le A/B: Propei	rtv			12/15
			ce. If an asset fits in more than or	Part Control	
information. If mo Answer every que	re space is needed, attach a se stion.	parate sheet to this form	people are filing together, both and the top of any additional page four Own or Have an Interest In		
l. Do you own or	have any legal or equitable into	erest in any residence, bu	uilding, land, or similar property?		
■ No. Go to Pa	rt 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
□ No ■ Yes					
3.1 Make:	Lexus	Who has an interes	st in the property? Check one		laims or exemptions. Put ed claims on Schedule D:
Model:	LHS	Debtor 1 only			ims Secured by Property.
Year:	2009	Debtor 2 only		Current value of the	Current value of the
	te mileage: 126,217	Debtor 1 and De	btor 2 only	entire property?	portion you own?
Other infor		At least one of th	ne debtors and another		
VIN = JT	HCL46F995002769	Check if this is (see instructions)	community property	\$22,380.00	\$22,380.00
Examples: Boa No Yes Add the doll pages you h Part 3: Describe	ats, trailers, motors, personal	watercraft, fishing vess own for all of your ent ite that number here	Il vehicles, other vehicles, and els, snowmobiles, motorcycle ad els, snowmobiles, els, els, snowmobiles, els, els, snowmobiles, els, els, els, els, snowmobiles, els, els, els, els, els, els, els,	y entries for	\$22,380.00 Current value of the portion you own?
					Do not deduct secured claims or exemptions.

L	Debtor 1	Jamal Uddin Patillo	Case number (if known)	16-52620-MAR
6.		Id goods and furnishings s: Major appliances, furniture, linens, china, kitchenware		
		Describe		
7.	Electron Example	cs s: Televisions and radios; audio, video, stereo, and digital equipmer including cell phones, cameras, media players, games	nt; computers, printers, scanners; music c	ollections; electronic devices
	■ No □ Yes.	Describe		
8.		les of value s: Antiques and figurines; paintings, prints, or other artwork; books, other collections, memorabilia, collectibles	pictures, or other art objects; stamp, coin,	or baseball card collections;
		Describe		
9.		nt for sports and hobbies s: Sports, photographic, exercise, and other hobby equipment; bicyc musical instruments	cles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
	☐ Yes.	Describe		
10	□ No	les: Pistols, rifles, shotguns, ammunition, and related equipment		
	■ Yes.	Describe		
_		Taurus 40 cal Serail #S7L70089 - \$300.00		\$300.00
11	□ No ´	les: Everyday clothes, furs, leather coats, designer wear, shoes, acc	essories	
		Clothing - \$200.00		****
_		Shoes - \$150.00		\$350.00
12	■ No	les: Everyday jewelry, costume jewelry, engagement rings, wedding	rings, heirloom jewelry, watches, gems, ς	old, silver
13		m animals les: Dogs, cats, birds, horses		
	☐ Yes.	Describe		
14	■ No	er personal and household items you did not already list, inclu- Give specific information	ding any health aids you did not list	
1		ne dollar value of all of your entries from Part 3, including any e rt 3. Write that number here		\$650.00
		cribe Your Financial Assets		
C	o you ow	n or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.

D	ebtor 1 Jamal Udo	din Patillo		Case	number (if known) 16-52620-M	AR		
16.	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No							
	■ Yes			C	ash - 100.00	\$100.00		
17.	institution			certificates of deposit; shares in credit unthe same institution, list each.	nions, brokerage houses, and oth	er similar		
	□ No ■ Yes			Institution name:				
		17.1.	Checking Account #1844	CACU Credit Union		\$277.05		
		17.2.	Savings Account #1844	CACU Credit Union		\$739.06		
18.	. Bonds, mutual fund Examples: Bond fund ■ No □ Yes	ds, investme		ge firms, money market accounts				
19.	Non-publicly traded joint venture ■ No	stock and information		d and unincorporated businesses, inc	luding an interest in an LLC, pa	ortnership, and		
20.	Negotiable instrume	nts include pruments are to	ersonal checks, cashiers hose you cannot transfe	e and non-negotiable instruments ' checks, promissory notes, and money o to someone by signing or delivering then				
21.	Retirement or pensi Examples: Interests No Yes. List each accord	in IRA, ERIS	6A, Keogh, 401(k), 403(b	, thrift savings accounts, or other pension Institution name:	or profit-sharing plans			
22.		nd prepaym used deposit	ents s you have made so that	you may continue service or use from a coutilities (electric, gas, water), telecommu				
23		et for a perior	lic navment of money to	ou, either for life or for a number of years	2)			
. ک	■ No Yes	·	e and description.	years	"			
24.		ation IRA, ir 1), 529A(b), a	an account in a qualifi and 529(b)(1).	ed ABLE program, or under a qualified parately file the records of any interests.1				
25.		future inter	ests in property (other	than anything listed in line 1), and righ	· (/	our benefit		

26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	■ No	
	☐ Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	■ No □ Yes. Give specific information about them	
M	oney or property owed to you?	Current value of the
		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years	
	Tes. Give specific information about them, including whether you already flied the returns and the tax years	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement.	ement
	☐ Yes. Give specific information	
	·	
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation benefits; unpaid loans you made to someone else	on, Social Security
	■ No	
	☐ Yes. Give specific information	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	□ No ■ No	
	Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary:	Surrender or refund value:
	Term Life through Employer Note: No Cash Value	\$0.00
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive someone has died.	property because
	■ No	
	Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	☐ Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set	off claims
	■ No □ Yes. Describe each claim	
35	Any financial assets you did not already list	
55.	■ No	
	Tyes Give specific information	

Case number (if known) 16-52620-MAR

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1

Jamal Uddin Patillo

Debtor	1 Jamal Uddin Patillo		Case number (if known)	16-52620-MAR
	dd the dollar value of all of your entries from Part 4, includin r Part 4. Write that number here			\$1,116.11
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. Do y	ou own or have any legal or equitable interest in any business-relate	ed property?		
■ No	o. Go to Part 6.			
☐ Ye	s. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do	you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
Exa ■ N	you have other property of any kind you did not already list' amples: Season tickets, country club membership lo les. Give specific information	•		
54. A c	dd the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P a	art 1: Total real estate, line 2			\$0.00
56. P a	art 2: Total vehicles, line 5	\$22,380.00		
	art 3: Total personal and household items, line 15	\$650.00		
58. P a	art 4: Total financial assets, line 36	\$1,116.11		
	art 5: Total business-related property, line 45	\$0.00		
60 P:	art 6: Total farm- and fishing-related property, line 52	\$0.00		
	art 7: Total other property not listed, line 54 +	\$0.00		
61. P a	ert 7: Total other property not listed, line 54 + otal personal property. Add lines 56 through 61	\$0.00 \$24,146.11	Copy personal property to	otal \$24,146.11

Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Jamal Uddin Pati	llo						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN					
Case number	16-52620-MAR							
(if known)	TO OZOZO MIAIN				_	Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	dentify the	Property	You Claim	as Exempt
---------	-------------	-----------------	-----------	-----------

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Check only one box for each exemption. Schedule A/B							
	2009 Lexus LHS 126,217 miles VIN = JTHCL46F995002769	\$22,380.00		\$3,775.00	11 U.S.C. § 522(d)(2)				
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	Taurus 40 cal Serail #S7L70089 - \$300.00	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit					
	Clothing - \$200.00 Shoes - \$150.00	\$350.00		\$350.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					
	Cash - \$100.00 Line from <i>Schedule A/B</i> : 16.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)				
	Line nom <i>Schedule Arb.</i> 10.1			100% of fair market value, up to any applicable statutory limit					
	Checking Account #1844: CACU Credit Union	\$277.05		\$277.05	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	Savings Account #1844: CACU Credit Union	\$739.06		\$739.06	11 U.S.C. § 522(d)(5)		
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			ed on or after the date of adjustmer	ıt.)		
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No						
	☐ Yes						

	ır case:				
Debtor 1 Jamal Uddin Pa	Middle Name	Loot Nome			
Debtor 2	Middle Name	Last Name			
(Spouse if, filing) First Name	Middle Name	Last Name		-	
United States Bankruptcy Court for the:	EASTERN DISTRICT OF MICH	HIGAN			
Coop number 40 F0000 MAD					
Case number 16-52620-MAR (if known)				☐ Check	if this is an
				_	ded filing
Official Form 106D					
Schedule D: Creditors	Who Have Claims	Secure	d by Propert	V	12/15
			<u> </u>	<u> </u>	
Be as complete and accurate as possible. is needed, copy the Additional Page, fill it number (if known).					
1. Do any creditors have claims secured by	your property?				
☐ No. Check this box and submit t	his form to the court with your other	schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in all of the information	below.		•		
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has i	more than one secured claim, list the cre	ditor congratoly	Column A	Column B	Column C
for each claim. If more than one creditor has much as possible, list the claims in alphabeti	a particular claim, list the other creditors	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Chase Auto	Describe the property that secures t	the claim:	\$26,864.00	\$22,380.00	\$4,484.00
Creditor's Name	2009 Lexus LHS 126,217 mil VIN = JTHCL46F995002769	es			
PO Box 901003	As of the date you file, the claim is:	Check all that			
Fort Worth, TX 76101	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as	mortgage or sec	cured		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	Auto Loan			
community debt					
	Last 4 digits of account numl	ber <u>1835</u>			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill in this information to id-						
Fill in this information to ide	entify your case:					
Debtor 1 Jamal U	Jddin Patillo	ddle Name Last N				
Debtor 2	IVIII	ddle Name Last N	ame			
(Spouse if, filing) First Name	Mid	ddle Name Last N	ame			
United States Bankruptcy Co.	urt for the: EASTE	RN DISTRICT OF MICHIGAN				
Case number 16-52620-N	MAR					
(if known)						if this is an ed filing
Official Form 106E/F	=					
	_	ave Unsecured Clair	ns			12/15
Schedule G: Executory Contract Schedule D: Creditors Who Have	is and Unexpired Leaso Claims Secured by Pige to this page. If you h	d result in a claim. Also list exect es (Official Form 106G). Do not in roperty. If more space is needed, nave no information to report in a	clude any cre copy the Par	editors with partially s t you need, fill it out, i	ecured claims that a number the entries in	re listed in the boxes on the
Part 1: List All of Your Pl	RIORITY Unsecured	Claims				
1. Do any creditors have prior	ity unsecured claims a	gainst you?				
☐ No. Go to Part 2.						
Yes.						
— 165.						
List all of your priority unse identify what type of claim it is possible, list the claims in alp	s. If a claim has both pric habetical order accordin	itor has more than one priority unse ority and nonpriority amounts, list the g to the creditor's name. If you have im, list the other creditors in Part 3.	at claim here a	and show both priority a	nd nonpriority amount	s. As much as
List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi	s. If a claim has both pric habetical order accordin tor holds a particular cla	ority and nonpriority amounts, list that	at claim here a e more than tv	and show both priority a	nd nonpriority amount	s. As much as
List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi	s. If a claim has both pric habetical order accordin tor holds a particular cla	ority and nonpriority amounts, list the g to the creditor's name. If you have im, list the other creditors in Part 3.	at claim here a e more than tv	and show both priority a	nd nonpriority amount	s. As much as
List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each ty Michigan Departm	s. If a claim has both price habetical order according tor holds a particular classifier of claim, see the instance of claim, see the claim, see the instance of claim, see the clai	ority and nonpriority amounts, list the g to the creditor's name. If you have im, list the other creditors in Part 3.	at claim here a more than tw on booklet.)	and show both priority a vo priority unsecured cla	nd nonpriority amount aims, fill out the Contir	s. As much as nuation Page of Nonpriority
2. List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type) 2.1 Michigan Departm Priority Creditor's Name Collection/Bankru POB 30168	s. If a claim has both prichabetical order according tor holds a particular classifier of claim, see the instance of Treasury Introduction of Treasury	ority and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions.	at claim here a more than tw on booklet.)	and show both priority a vo priority unsecured cla Total claim	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
2. List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type) 2.1 Michigan Departm Priority Creditor's Name Collection/Bankru	s. If a claim has both prichabetical order according tor holds a particular classifier of claim, see the instance of the treasury aptrox Unit	ority and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions that 4 digits of account numb	at claim here a emore than two on booklet.) er 0599 2013	and show both priority a vo priority unsecured class Total claim \$1,892.62	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
2. List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type) 2.1 Michigan Departm Priority Creditor's Name Collection/Bankru POB 30168 Lansing, MI 48909	s. If a claim has both prichabetical order according tor holds a particular classifier of claim, see the instance of the control of the contr	ority and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions that 4 digits of account numb. When was the debt incurred?	at claim here a emore than two on booklet.) er 0599 2013	and show both priority a vo priority unsecured class Total claim \$1,892.62	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type of the content of t	s. If a claim has both prichabetical order according tor holds a particular classifier of claim, see the instance of the control of the contr	prity and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions for this form account numb. When was the debt incurred? As of the date you file, the cla	at claim here a emore than two on booklet.) er 0599 2013	and show both priority a vo priority unsecured class Total claim \$1,892.62	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
2. List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type of the content of th	s. If a claim has both prichabetical order according tor holds a particular classifier of claim, see the instance of the control of the contr	ority and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions for this form in the instructions for this form in the instruction Last 4 digits of account numb. When was the debt incurred? As of the date you file, the cla Contingent Unliquidated	at claim here a emore than two on booklet.) er 0599 2013	and show both priority a vo priority unsecured class Total claim \$1,892.62	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
2. List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type of the content of th	s. If a claim has both prichabetical order accordinator holds a particular classifier of claim, see the instance of the control of the contro	prity and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions for this form in the instructions for this form in the instruction when was the debt incurred? As of the date you file, the clast Contingent	at claim here as a more than two on booklet.) er 0599 2013 im is: Check	and show both priority a vo priority unsecured class Total claim \$1,892.62	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
2. List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type of the content of the	s. If a claim has both prichabetical order according to holds a particular claype of claim, see the instance of Treasury aptcy Unit E ZIp Code heck one.	prity and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions for this form in the instructions for this form in the instruction Last 4 digits of account numb When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed	e more than two on booklet.) er 0599 2013 im is: Check of the characteristics are considered as a constant of the characteristics are considered as a constant of the characteristics are constant on the characteristics.	and show both priority a vo priority unsecured class Total claim \$1,892.62	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
2. List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type o	s. If a claim has both prichabetical order accordinator holds a particular classifier of claim, see the instance of the control of the contro	prity and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions for this form in the instructions for this form in the instruction. Last 4 digits of account numb When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecured Domestic support obligations	et claim here a emore than two on booklet.) er 0599 2013 im is: Check a claim:	and show both priority a vo priority unsecured class and claim \$1,892.62 all that apply	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
2. List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type of the content of th	s. If a claim has both prichabetical order accordinator holds a particular claype of claim, see the instance of Treasury Iptcy Unit 2 Zlp Code heck one.	prity and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions for this form in the instructions for this form in the instruction Last 4 digits of account numb. When was the debt incurred? As of the date you file, the clast Contingent Unliquidated Disputed Type of PRIORITY unsecured	e more than two on booklet.) er 0599 2013 im is: Check is claim:	and show both priority a vo priority unsecured class and show both priority and priority unsecured class at the state of t	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount
2. List all of your priority unse identify what type of claim it is possible, list the claims in alp Part 1. If more than one credi (For an explanation of each type of the context of the context of the claim in the part of the claim in the context of the claim in the context of the claim is a context of the claim in the claim is for the claim is for check if this claim is for claim is claim.	s. If a claim has both prichabetical order accordinator holds a particular claype of claim, see the instance of Treasury Iptcy Unit 2 Zlp Code heck one.	prity and nonpriority amounts, list that g to the creditor's name. If you have im, list the other creditors in Part 3. tructions for this form in the instructions for this form in the instructions for this form in the instruction Last 4 digits of account numb. When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecured Domestic support obligations Taxes and certain other debt	et claim here a emore than two on booklet.) er 0599 2013 im is: Check a claim: s you owe the injury while you	and show both priority a vo priority unsecured class and show both priority and priority unsecured class and show priority under cla	nd nonpriority amount aims, fill out the Contir Priority amount	S. As much as nuation Page of Nonpriority amount

Debt	tor 1 Jamal Uddin Patillo		Case nu	umber (if know)	16-52620-MAR	
2.2	Michigan Department of Treasury	Last 4 digits of account number	0599	\$2,720.57	\$2,720.57	\$0.00
	Priority Creditor's Name	When was the debt incomed?	2014			•
	Collection/Bankruptcy Unit POB 30168	When was the debt incurred?	2014		-	
	Lansing, MI 48909					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all	that apply		
	Debtor 1 only	☐ Contingent				
	_ ′	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	iim:			
	At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the go	overnment		
	Is the claim subject to offset?	☐ Claims for death or personal inj	ury while you	were intoxicated		
	No	Other. Specify				
	Yes	MI 1040 Ta	X			
2.3	Michigan Department of Treasury Priority Creditor's Name	Last 4 digits of account number	0599	\$2,978.73	\$2,978.73	\$0.00
	Collection/Bankruptcy Unit POB 30168	When was the debt incurred?	2015		-	
	Lansing, MI 48909					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all	that apply		
	_	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	iim:			
	At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the go	overnment		
	Is the claim subject to offset?	☐ Claims for death or personal inj	ury while you	were intoxicated		
	No	Other. Specify				
	Yes	MI 1040 Ta	X			
2.4	Michigan Department of Treasury	Last 4 digits of account number	0599;57 64	\$298.50	\$298.50	\$0.00
	Priority Creditor's Name Collection/Bankruptcy Unit POB 30168	When was the debt incurred?			_	
	Lansing, MI 48909					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the a	overnment		
	Is the claim subject to offset?	☐ Claims for death or personal inj	_			
	No	☐ Other. Specify				
	□Yes	MI 1040 Ta	Х			

Schedule E/F: Creditors Who Have Unsecured Claims

^{r 1} Jamal Uddin Patillo	Case numbe	, (II KIIOW)	16-52620-MA	
Michigan Dept. of Treasury	Last 4 digits of account number 0599	\$0.00	\$0.	00 \$0
Priority Creditor's Name C/o Michigan Atty. General's	When was the debt incurred?			
Office			-	
3030 W. Grand Blvd, Ste. 10-200				
Detroit, MI 48202 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that a	apply		
Vho incurred the debt? Check one.	☐ Contingent	ייייי		
Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
At least one of the debtors and another	Domestic support obligations			
_	_			
Check if this claim is for a community debt	Taxes and certain other debts you owe the govern			
s the claim subject to offset? ■ No	Claims for death or personal injury while you were	intoxicated		
⊒ Yes	Other. Specify Notice Only			
secured claim, list the creditor separately for each cl	s against you?	s. Do not list cla	aims already includ	ded in Part 1. If mo
o any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim.	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor
No. You have nothing to report in this part. Submit Yes. St all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other	s against you? this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
No. You have nothing to report in this part. Submit Yes. St all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other t 2. Ally Financial Nonpriority Creditor's Name	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
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No. You have nothing to report in this part. Submit Yes. St all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other t 2. Ally Financial Nonpriority Creditor's Name	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
No. You have nothing to report in this part. Submit Yes. It all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other rt 2. Ally Financial Nonpriority Creditor's Name c/o Central Credit Services LLC 20 Corporate Hills Drive Saint Charles, MO 63301 Number Street City State Zlp Code	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
vany creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. Stall of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other it 2. Ally Financial Nonpriority Creditor's Name c/o Central Credit Services LLC 20 Corporate Hills Drive Saint Charles, MO 63301	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori Last 4 digits of account number 8888 When was the debt incurred?	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
vany creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. Stall of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other rt 2. Ally Financial Nonpriority Creditor's Name c/o Central Credit Services LLC 20 Corporate Hills Drive Saint Charles, MO 63301 Number Street City State Zlp Code	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori Last 4 digits of account number 8888 When was the debt incurred?	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
No. You have nothing to report in this part. Submit Yes. St all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other it 2. Ally Financial Nonpriority Creditor's Name c/o Central Credit Services LLC 20 Corporate Hills Drive Saint Charles, MO 63301 Number Street City State ZIp Code Who incurred the debt? Check one.	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
Ally Financial Nonpriority Creditor's Name c/o Central Credit Services LLC 20 Corporate Hills Drive Saint Charles, MO 63301 Number Street City State Zlp Code Who incurred the debt? Check one.	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
Ally Financial Nonpriority Creditor's Name c/o Central Credit Services LLC 20 Corporate Hills Drive Saint Charles, MO 63301 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 2 only Debtor 2 only	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3. If you have more than three nonpriori Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	s. Do not list cla	aims already includ aims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
Ally Financial Nonpriority Creditor's Name c/o Central Credit Services LLC 20 Corporate Hills Drive Saint Charles, MO 63301 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	s. Do not list cla	aims already includaims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
Ally Financial Nonpriority Creditor's Name c/o Central Credit Services LLC 20 Corporate Hills Drive Saint Charles, MO 63301 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori Last 4 digits of account number 8888 When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreeme	s. Do not list cla	aims already includaims fill out the Co	ded in Part 1. If mor ontinuation Page of Fotal claim
Ally Financial Nonpriority Creditor's Name Corporate Hills Drive Saint Charles, MO 63301 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreeme report as priority claims	s. Do not list cla ty unsecured cl	aims already includations fill out the Co	ded in Part 1. If more ontinuation Page of
Ally Financial Nonpriority Creditor's Name c/o Central Credit Services LLC 20 Corporate Hills Drive Saint Charles, MO 63301 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. For each claim listed, identify what type of claim it is creditors in Part 3.If you have more than three nonpriori Last 4 digits of account number 8888 When was the debt incurred? As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreeme	s. Do not list cla ty unsecured cl	aims already includations fill out the Co	ded in Part 1. If more ontinuation Page of

Debtor	1 Jamal Uddin Patillo	Case number (if know) 16-52620-MA	R
4.2	Comerica Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$1,046.00
	PO Box 75000 Detroit, MI 48275-8293	When was the debt incurred?	
•	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent ☐ Unliquidated	
	Debtor 2 only		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Misc.	
4.3	Credit One Bank	Last 4 digits of account number	\$2,397.68
	Nonpriority Creditor's Name c/o JCC	When was the debt incurred?	
	PO Box 519	When was the dept incurred:	
	Sauk Rapids, MN 56379		
•	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Misc.	
4.4	JP Morgan Chase Bank NA	Last 4 digits of account number 0962	\$5,995.44
	Nonpriority Creditor's Name PO Box 11606	When was the debt incurred?	
	Lexington, KY 40576-1606	When was the dest mounted.	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Misc.	
		1/	

Schedule E/F: Creditors Who Have Unsecured Claims

Debto	¹ Jamal Uddin Patillo	Case number (if know) 16-52620-MAR	
4.5	Merrick Bank	Last 4 digits of account number 4806	\$3,022.00
	Nonpriority Creditor's Name 10705 S. Jordan Gtwy Ste 200 South Jordan, UT 84095	When was the debt incurred?	. ,
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Misc.	
	Li res	Other. Specify	
4.6	Prosper Marketplace Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$10,966.00
	101 2nd St Fl 15 San Francisco, CA 94105	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	<u> </u>	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	■ Other. Specify Personal Loan	
4.7	Synchrony Bank/JCP	Last 4 digits of account number 0061	\$1,198.15
	Nonpriority Creditor's Name c/o CAC Financial Corp 2601 New Expressway Ste 100 East	When was the debt incurred?	
	Oklahoma City, OK 73112 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Misc.	

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor '	Jamal Ud	ldin Patillo		Case r	number (if know)	16-52620-MAR	
	Village Gre	en Townhomes	Last 4 digits of account number	3178	<u> </u>		\$1,418.00
	c/o Hunter	Warfield . MLK Blvd. Fl 2	When was the debt incurred?				
	Number Street	City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Checl	k all that apply		
	■ Debtor 1 on	lv	☐ Contingent				
	Debtor 2 on	•	☐ Unliquidated				
		d Debtor 2 only	☐ Disputed				
		e of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		is claim is for a community	☐ Student loans				
	debt	bject to offset?	Obligations arising out of a separeport as priority claims	aration aç	greement or divorce	that you did not	
	■ No	,	Debts to pension or profit-shari	ng plans.	and other similar de	ebts	
	☐ Yes		·	•			
	L Yes		■ Other. Specify Lease Defi	Clefficy			
	Walmart Nonpriority Cre	alla de Norda	Last 4 digits of account number	7479	<u> </u>		\$310.87
	PO Box 530 Atlanta. GA	0939	When was the debt incurred?				
_		City State ZIp Code the debt? Check one.	As of the date you file, the claim	is: Checl	k all that apply		
	Debtor 1 on	lly	☐ Contingent				
	Debtor 2 on	ıly	☐ Unliquidated				
	Debtor 1 an	d Debtor 2 only	☐ Disputed				
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		is claim is for a community	☐ Student loans				
	debt Is the claim su	ubject to offset?	Obligations arising out of a separeport as priority claims	aration aç	greement or divorce	that you did not	
	■ No		Debts to pension or profit-sharing	ng plans,	and other similar de	ebts	
	☐ Yes		Other. Specify Misc.				
Part 3:	List Other	s to Be Notified About a Debt	That You Already Listed				
is tryin have m	ng to collect from nore than one of d for any debts	om you for a debt you owe to som creditor for any of the debts that s in Parts 1 or 2, do not fill out or		n Parts 1	or 2, then list the	collection agency here	e. Similarly, if you
Part 4:		mounts for Each Type of Uns					
	he amounts of f unsecured cla		s. This information is for statistical i	reporting	purposes only. 28	3 U.S.C. §159. Add the	amounts for each
					Total	Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
	otal ims						
from Pa		Taxes and certain other debts	-	6b.	\$	7,890.42	
	6c.	•	jury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	7,890.42	
					Total	Claim	
_	6f.	Student loans		6f.	\$	0.00	
	otal ims						
from Pa			paration agreement or divorce that	6g.	\$	0.00	
	6h.	you did not report as priority of Debts to pension or profit-shar	aıms ing plans, and other similar debts	6h.	\$	0.00	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 7

Debtor 1 Jamal Uddin Patillo

Case number (if know) 16-52620-MAR

 Other. Add all other nonpriority unsecured claims. Write that amount here.

\$ 27,385.96

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **27,385.96**

Fill in this inform	mation to identify your	case:			
Debtor 1	Jamal Uddin Patil	llo			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN		
Case number	16-52620-MAR				
(if known)	TO OZOZO MAIX				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	. 3.0001	Name, Number	, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	O:t- ·		04-4-	71D O	_
2.4	City		State	ZIP Code	
2.4	Name				<u> </u>
	INAILIE				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.5	J.,		3.0.0		
	Name				_
	Number	Street			<u> </u>
	MULINE	Glieet			
	City		State	ZIP Code	_

Fill in th	nis information to identify you	r case:		
Debtor 1 Debtor 2 (Spouse if,	Jamal Uddin Pat		Loot Nome	
		Middle Name	Last Name	
	, filing) First Name	Middle Name	Last Name	
United S	States Bankruptcy Court for the:	EASTERN DISTRICT C	DF MICHIGAN	
Case nu (if known)	umber <u>16-52620-MAR</u>			☐ Check if this is an amended filing
_	al Form 106H edule H: Your Cod	debtors		12/15
people a	are filing together, both are eq	ually responsible for supp e boxes on the left. Attach	olying correct information. If mo n the Additional Page to this pag	te and accurate as possible. If two married ore space is needed, copy the Additional Page, ge. On the top of any Additional Pages, write
1. D	Oo you have any codebtors? (I	f you are filing a joint case,	do not list either spouse as a code	ebtor.
	No			
■ Y	⁄es			
			roperty state or territory? (Comnuerto Rico, Texas, Washington, and	nunity property states and territories include d Wisconsin.)
	No. Go to line 3.			
_	es. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?	
in li For	ine 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make sure you	pouse is filing with you. List the person shown have listed the creditor on Schedule D (Official Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		mn 2: The creditor to whom you owe the debt ck all schedules that apply:
3.1	Dawn Patillo 18014 Parkside Detroit, MI 48221		■ Se	chedule D, line chedule E/F, line2.1 chedule G nigan Department of Treasury
3.2	Dawn Patillo 18014 Parkside Detroit, MI 48221		■ Sc □ Sc	chedule D, line chedule E/F, line 2.2
				chedule G nigan Department of Treasury

	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Dawn Patillo 18014 Parkside Detroit, MI 48221	☐ Schedule D, line ■ Schedule E/F, line2.5 ☐ Schedule G Michigan Dept. of Treasury

Case number (if known) 16-52620-MAR

Debtor 1 Jamal Uddin Patillo

Schedule H: Your Codebtors

Page 2 of 2
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16-52620-mar Doc 10 Filed 09/26/16 Entered 09/26/16 13:40:06 Page 20 of 33

Fill	in this information to identify your c	ase:								
Del	otor 1 Jamal Uddi	n Patillo								
	otor 2				_					
Uni	ted States Bankruptcy Court for the	e: EASTERN DISTRICT	OF MICHIGAN							
	se number 16-52620-MAR nown)		-			☐ An	t if this is:	J		
								•	g postpetition bllowing date:	
0	fficial Form 106I					M	M / DD/ YY	YYY		
S	chedule I: Your Inc	ome								12/15
spo atta Pa	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The Describe Employment	ır spouse is not filing wi	ith you, do not inclu	de infor	mati	on about	your spou	use. If mo	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fil	ling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Employ			
	information about additional employers.	. ,	☐ Not employed	☐ Not employed			☐ Not em	nployed		
	. ,	Occupation	Table Games D	ealer						
	Include part-time, seasonal, or self-employed work.	Employer's name	Hollywood Cas	ino						
	Occupation may include student or homemaker, if it applies.	Employer's address	777 Hollywood Toledo, OH 436							
		How long employed to	here? 1.5 Yea	ırs						
Pai	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the s	space. Inc	clude your no	n-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the informatio	n for all e	emplo	oyers for th	hat person	n on the lir	nes below. If	you need
						For Deb	tor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,8	860.50	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	3,86	0.50	\$	N/A	

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify:

11. +\$

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

12. \$ 3,205.95

Combined monthly income

0.00

13. Do you expect an increase or decrease within the year after you file this form?

No.

☐ Yes. Explain:

In lieu of Child Support, debtor paying 1/2 of household expense where dependents live. Debtor and non-filing spouse are separated and do not share income.

	in this informa	tion to identify yo	our case:			1		
						Ch-	ook if this is:	
Debi	Debtor 1 Jamal Uddin Patillo					Check if this is:		
	tor 2						A supplement show	wing postpetition chapter
(Spc	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	6AN		MM / DD / YYYY	
	e number 16	5-52620-MAR						
Of	ficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	nses				12/15
Be a	as complete a ormation. If m	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
Part	t 1: Descr Is this a join	ibe Your House	hold					
١.	■ No. Go to							
	_		in a separ	ate household?				
	N							
			st file Offici	ial Form 106J-2, Expenses	for Separate House	ehold of Del	otor 2.	
2.	Do you have	e dependents?	□ No					
۷.	Do not list De Debtor 2.	•	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		5 Years	Yes
					Daughter		8 Years	□ No ■ Yes
					Dauginei			■ Yes □ No
								☐ Yes
								□ No
								☐ Yes
3.		enses include f people other t	han I	No				
		d your depende		Yes				
Part	2: Estim	ate Your Ongoi	na Month	ly Fynenses				
Esti	imate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp				
Incl	ude expense	s paid for with	non-cash	government assistance i	f you know			
the		n assistance an		cluded it on Schedule I: \			Your exp	enses
(011		01.)						
4.		r home owners ad any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	700.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
				upkeep expenses		4c.		0.00
F		owner's associat			mo oquity locate	4d. 5.		0.00
5.	Auditional	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	Φ	0.00

Official Form 106J Schedule J: Your Expenses page 1 16-52620-mar Doc 10 Filed 09/26/16 Entered 09/26/16 13:40:06 Page 23 of 33

Debtor 1 Ja	amal Uddin Patillo	Case number	if known)	16-52620-MAR
. Utilities:	:			
6a. Ele	ectricity, heat, natural gas	6a. \$		242.00
6b. W	ater, sewer, garbage collection	6b. \$		150.00
6c. Te	elephone, cell phone, Internet, satellite, and cable services	6c. \$		300.00
6d. Ot	ther. Specify:	6d. \$		0.00
Food an	nd housekeeping supplies	7. \$		450.00
	re and children's education costs	8. \$		0.00
	g, laundry, and dry cleaning	9. \$		0.00
_	al care products and services	10. \$		60.00
	and dental expenses	11. \$		0.00
	ortation. Include gas, maintenance, bus or train fare.	• • • • • • • • • • • • • • • • • • • •		
	nclude car payments.	12. \$		350.00
	nment, clubs, recreation, newspapers, magazines, and books	13. \$		0.00
. Charitab	ole contributions and religious donations	14. \$		0.00
5. Insurano	ce.			
	nclude insurance deducted from your pay or included in lines 4 or 20.			
	fe insurance	15a. \$		8.00
	ealth insurance	15b. \$		0.00
15c. Ve	ehicle insurance	15c. \$		200.66
	ther insurance. Specify:	15d. \$		0.00
Taxes. D Specify:	Oo not include taxes deducted from your pay or included in lines 4 or 2	0. 16. \$		0.00
7. Installm	ent or lease payments:			
17a. Ca	ar payments for Vehicle 1	17a. \$		0.00
17b. Ca	ar payments for Vehicle 2	17b. \$		0.00
17c. Ot	ther. Specify:	17c. \$		0.00
17d. Ot	ther. Specify:	17d. \$		0.00
. Your pay	yments of alimony, maintenance, and support that you did not re	oort as		0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form			0.00
_	ayments you make to support others who do not live with you.	\$		0.00
Specify:		19.		
	eal property expenses not included in lines 4 or 5 of this form or o		ncome.	
	ortgages on other property	20a. \$		0.00
	eal estate taxes	20b. \$		0.00
	roperty, homeowner's, or renter's insurance	20c. \$		0.00
	aintenance, repair, and upkeep expenses	20d. \$		0.00
20e. Ho	omeowner's association or condominium dues	20e. \$		0.00
. Other: S	Specify:	21+\$		0.00
2. Calculat	te your monthly expenses			
	d lines 4 through 21.		5	2,460.66
	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2	<u> </u>	-,
	d line 22a and 22b. The result is your monthly expenses.			2,460.66
	, , ,			2,400.00
	te your monthly net income.			
	opy line 12 (your combined monthly income) from Schedule I.	23a. \$		3,205.95
23b. Co	opy your monthly expenses from line 22c above.	23b\$		2,460.66
	ubtract your monthly expenses from your monthly income.	00-		745.29
	ne result is your <i>monthly net income</i> .	23c. \$		143.29
For examp	expect an increase or decrease in your expenses within the year aple, do you expect to finish paying for your car loan within the year or do you expon to the terms of your mortgage?			ease or decrease because o
_				
■ No.				

Official Form 106J page 2

Fill in this info	ormation to identify your	case:			
Debtor 1	Jamal Uddin Pati	llo			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN		
Case number	16-52620-MAR				
(if known)					Check if this is an amended filing
You must file to		le bankruptcy schedules n connection with a banl	s or amended schedules.	ect information. Making a false statement, co n fines up to \$250,000, or imp	
S	ign Below				
ا Did you	pay or agree to pay some	one who is NOT an attor	rney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	. Name of person				etition Preparer's Notice, nature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	d with this declaration and	
	amal Uddin Patillo		X		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Signature of Debtor 2

Date

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Jamal Uddin PatilloSignature of Debtor 1

Date September 19, 2016

Best Case Bankruptcy

Fill in t	this inform	ation to identify you	r case:				
Debtor	1	Jamal Uddin Pat	tillo				
		First Name	Middle Name	Last Name			
Debtor (Spouse i		First Name	Middle Name	Last Name			
United	States Bar	kruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN			
Case n	umber 1	6-52620-MAR					
(if known)	· · · · · ·	0 02020 1117414			_	Check if this is an	
						amended filing	
Ott: -	ial Far	107					
		<u>m 107</u>	Affaira far Individ	duala Eilina far B	lankrunta.	444	
			Affairs for Individ			4/1	
informa	ation. If me	ore space is needed,	ble. If two married people a attach a separate sheet to				
number	r (if known). Answer every que	stion.				
Part 1:	Give D	etails About Your Ma	arital Status and Where You	Lived Before			
1. Wł	What is your current marital status?						
	Married						
	Not mari	ried					
2. Du	ring the la	st 3 years, have you	lived anywhere other than	where you live now?			
	No						
		all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	٧.		
De	ebtor 1 Pri	or Address:	Dates Debtor 1	Debtor 2 Prior Ac	Idress:	Dates Debtor 2	
			lived there	_		lived there	
	0811 W. 1 ∣ak Park, ∣		From-To: 11/2014 - 6/20	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:	
	,						
	nnd territorie No	es include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne hedule H: Your Codebtors (O	vada, New Mexico, Puerto R			
Part 2	Explain	n the Sources of You	r Income				
Fill	I in the total	I amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part	-time activities.	endar years?	
	No Yes Fill	in the details.					
	100.11	in the details.	D		2.1/		
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income	
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)	
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$30,884.17	☐ Wages, commissions, bonuses, tips		
			Operating a business		☐ Operating a business		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Official Form 107

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	Debtor 1 Jamal Uddin Patillo		Case number (if known)			16-52620-MAR		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for		
	Chase Auto	Monthly	\$630.86	\$26,864.00	☐ Mortgage	;		
	PO Box 901003	-			■ Car			
	Fort Worth, TX 76101				☐ Credit Ca	ırd		
					☐ Loan Rep	payment		
					Suppliers	or vendors		
					Other			
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% o	eral partners; partners reporting	erships of which you	u are a genera ny managing a	al partner; corporations gent, including one for		
	NoYes. List all payments to an insider.							
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of navement	Total amount	Amount vou	December for	this payment		
	insider 5 Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider		ments or transfer a	any property on ac	ccount of a d	ebt that benefited an		
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name		
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.							
	■ No □ Yes. Fill in the details.							
	Case title	Nature of the case	Court or agency		Status of th	e case		
	Case number							
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	□ No. Go to line 11.							
	Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date		Value of the		
	Orealtor Name and Address			Date		property		
	Michigan Department of Treasury	Explain what happened Bank Deposit Accou		6/22/	16	\$831.35		
	Collection/Bankruptcy Unit	Bank Deposit Accou	III. #1449	UZZI	10	φ051.35		
	POB 30168	☐ Property was reposse						
	Lansing, MI 48909	☐ Property was foreclos						
		■ Property was garnished.						
		☐ Property was attached, seized or levied.						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	otor 1 Jamal Uddin Patillo	Case	number (if known)	16-52620-MAR				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.	otcy, did any creditor, including a bank or fina ause you owed a debt?	ancial institution,	, set off any amounts from your				
		Describe the action the analytication.	D-1					
	Creditor Name and Address	Describe the action the creditor took	Date a taken	action was Amount				
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes	cy, was any of your property in the possessio nother official?	on of an assignee	e for the benefit of creditors, a				
Par								
13.	Within 2 years before you filed for bankrup	tcy, did you give any gifts with a total value o	of more than \$600	0 per person?				
	■ No	, , , , , ,	·					
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates the gif	s you gave Value ifts				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you contributed	Dates contri	s you Value ibuted				
Par	16: List Certain Losses							
	Within 1 year before you filed for bankrupt or gambling?	cy or since you filed for bankruptcy, did you l	ose anything bed	cause of theft, fire, other disaster				
	Yes. Fill in the details.							
			D-1-	Makes of severe				
	how the loss occurred	escribe any insurance coverage for the loss acclude the amount that insurance has paid. List purance claims on line 33 of Schedule A/B: Propers	ending loss	of your Value of property lost				
Par	17: List Certain Payments or Transfers							
	consulted about seeking bankruptcy or pro	cy, did you or anyone else acting on your beheparing a bankruptcy petition? parers, or credit counseling agencies for services						
	□ No □ Voc Fill in the details							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred		payment Amount of nsfer was payment				
	B.O.C. Law Group, P.C. 24100 Woodward Avenue Pleasant Ridge, MI 48069 bocecf@boclaw.com	Attorney Fees	7/25/1 8/22/1	•				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred		Date payment or transfer was made	Amount of payment				
	Summit Financial Education 7651 W. August Moon Place Tucson, AZ 85743	Credit Counselii	ng		9/12/16	\$9.95			
17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you lis	or to make payments			or transfer any proper	rty to anyone who			
	■ No								
	Yes. Fill in the details.				_				
	Person Who Was Paid Address	Description and va transferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list	ness or financial affa as security (such as th	irs?		, ,	,			
	■ No □ Yes. Fill in the details.								
	Person Who Received Transfer	Description and value of Describe			any property or	Date transfer was			
	Address Person's relationship to you	property transferred payment			ts received or debts made exchange				
40	. ,					Contrata con con con			
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No		property to a	seir-settied tr	ust or similar device o	or which you are a			
	Yes. Fill in the details.								
	Name of trust	Description and va	Description and value of the property transferred			Date Transfer was made			
Par	t 8: List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and Sto	orage Units					
20.	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred?	•				,			
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No								
	Yes. Fill in the details. Name of Financial Institution and La	est 4 digits of	Type of accou	int or Da	ate account was	Last balance			
		count number	instrument	cle me	osed, sold, oved, or ansferred	before closing or transfer			
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, an	y safe depos	it box or other deposi	tory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

22.	22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	No No							
	Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
Par	9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust				
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	10: Give Details About Environmental Inform	nation						
For	he purpose of Part 10, the following definitions	s apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environm	ental law?				
	No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	rironmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	Give Details About Your Business or Co	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to any	y business?				
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time					
	☐ A member of a limited liability company	y (LLC) or limited liability partnersl	nip (LLP)					
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Debtor 1 Jamal Uddin Patillo Case number (if known) 16-52620-MAR

	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	■ No. None of the above applies. Go to Part 12.						
	☐ Yes. Check all that apply above and fill	the details below for each business.					
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.				
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed				
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	No						
	Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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Debtor	Jamal Uddin Patillo		Case number (if known)	16-52620-MAR
Part 12	Sign Below			
are true with a b 18 U.S.C	ead the answers on this <i>Statement of F</i> and correct. I understand that making ankruptcy case can result in fines up to 2. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property	/, or obtaining money or	, , , ,
Jamal	Uddin Patillo ure of Debtor 1	Signature of Debtor 2		
Date	September 19, 2016	Date		
Did you ■ No □ Yes	attach additional pages to Your Staten	nent of Financial Affairs for Individuals	s Filing for Bankruptcy ((Official Form 107)?

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).